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**Prepared By:**

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(FOR RECORDING USE ONLY)

## **NOTICE OF DEATH AFFIDAVIT AND ACCEPTANCE OF TRANSFER ON DEATH INSTRUMENT**

The undersigned beneficiary or beneficiaries, being duly sworn on oath, state as follows:

That \_\_\_\_\_ died on \_\_\_\_\_, 20\_\_\_\_,  
a resident of \_\_\_\_\_ County, State of Illinois, owning real estate legally described below:

That the street address of the residential real estate is \_\_\_\_\_ and the  
property identification number is \_\_\_\_\_ (PIN). That the Transfer on Death Instrument is  
dated \_\_\_\_\_ and recorded as Document No. \_\_\_\_\_ in the Office of the  
Recorder for \_\_\_\_\_ County, Illinois.

**That the undersigned whose names and addresses appear below are all beneficiaries entitled to receive under the Transfer on Death Instrument:**

<u>Name</u>	<u>Address</u>	<u>Share</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

In witness whereof, the undersigned beneficiaries hereby accept the transfer of residential real estate under the transfer on death instrument this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_ (Seal) \_\_\_\_\_ (Seal)

\_\_\_\_\_  
Print Name Print Name

\_\_\_\_\_ (Seal) \_\_\_\_\_ (Seal)

\_\_\_\_\_  
Print Name Print Name

\_\_\_\_\_ (Seal) \_\_\_\_\_ (Seal)

\_\_\_\_\_  
Print Name Print Name

**STATE OF ILLINOIS  
COUNTY OF SANGAMON**

**I, the undersigned, a Notary Public in and for said the State aforesaid, DO HEREBY CERTIFY THAT**

\_\_\_\_\_ personally known to me to be the same person or persons whose name or names are subscribed to the foregoing instrument, appeared before me this day in person and swore on oath to the above foregoing affidavit. Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_.

My commission expires on \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
(Notary Public) (SEAL)

**Instrument preparation is a specialized task which may demand legal knowledge or advice.**